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# Apolipoprotein AI-CIII-AIV genetic polymorphisms and coronary heart disease in type 2 diabetes mellitus.

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The aim of this study was to verify whether or not the increased prevalence of coronary heart disease (CHD) commonly observed in patients with type 2 diabetes mellitus is related to a genetic background involving restriction fragment length polymorphisms (RFLPs) of apolipoproteins. On the basis of a case-control design, 62 type 2 diabetic patients with CHD (confirmed by clinical history and electrocardiogram) and 62 age- and sex-matched diabetic subjects without CHD were enrolled. In each of them RFLPs of the apolipoprotein CIII gene (S1 or S2 allele) and AI promoter region (A or G allele), together with fasting plasma lipids and apolipoproteins levels, were assessed. The rare S2 allele was found significantly (P = 0.05) more frequently in patients with CHD, and its related S1S2 genotype was associated with higher plasma levels of total cholesterol (P = 0.01), triglycerides (P = 0.007) and apo B (P = 0.001) than the S1S1 genotype. The A allele was more frequent (P = 0.004) in patients without CHD and was associated with lower plasma cholesterol (P = 0.0001), low-density lipoprotein (LDL)-cholesterol (P = 0.0001) and apo B (P = 0.005). The S1/A haplotype was more frequent (P = 0.05) in patients without CHD and was associated with the lowest plasma lipid levels. These results suggest that genetic factors, related to the apo AI-CIII-AIV gene cluster, could play a role in the development of CHD in type 2 diabetic patients, probably through modification of their plasma lipid pattern.

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